

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS           | ID NO.    | DATE       |
|---------------------------|--------------------|-----------|------------|
| FEE DETERMINATION         |                    |           |            |
| O.I.P.E. CLASSIFIER       | <i>[Signature]</i> | <i>32</i> | <i>2/8</i> |
| FORMALITY REVIEW          | <i>[Signature]</i> | 1030      | 3-27-01    |
| RESPONSE FORMALITY REVIEW | <i>[Signature]</i> | 1030      | 4-27-01    |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

| Claim          | Date   |
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| Final Original |        |
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| Claim          | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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